Application or Docket Number

10014384

		Elicot	ive Octob	01 1, 20				1/0				
(Column 1) (Column 2) T									VTITY	OR	OTHER SMALL	
TOTAL CLAIMS			38					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
то	TAL CHARGEA	BLE CLAIMS	38 minus 20=		• 18			X\$ 9=	163.0	ØЯ	X\$18=	
INDEPENDENT CLAIMS			_	inus 3 =	. 4			X42≃	16800	ØЯ	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	- · - · · -
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	700.	OA	TOTAL	
(Column 1) (Column 2) (Column 3)									ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 37	Minus	** *	38	=		X\$ 9=		OR	X\$18=	
	Independent	. 10	Minus	***	7	- 3		X42=	1269	OR	X84=	
	FIRST PRESE	NTATION OF MI	JUIPLE DE	PENDEN	CLAIM			+140=		OR	+280=	
	B	(Column 1)		(Colu	ma 2\	(Column 3)	,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO	KEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 35	Minus	**39	7	. —		X\$ 9=		OR	X\$18=	ı
AME	Independent	· /0	Minus	***/	7	=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF MU	JETIPLE DEF	ENDEN	CLAIN			+140=		OR	+280=	
0								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	((Column 1)		(Colu	mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH	IEST IBER OUSLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	·25	Minus	# 3	8	=		X\$ 9=		OR	X\$18=	
AME	Independent	* 7	Minus	***) ()	=		X42=		OR	X84=	
•	FIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDEN	T ÇLAIM		F	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FFF										_	TOTAL ADDIT. FEE	
•	If the "Highest Nu The "Highest Nurr	mber Previously Pa ber Previously Pai	aid For" (N TH d For" (Total o	IS SPACE Ir Independ	is less tha lent) is the	in 3, enter "3." e highest number	r fou	nd in the app	propriate box	k in co	lumn 1.	
							2			A 000	DADTMENT OF	COMMEDI

FORM PTO-875 (Rev. 8/01)

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